

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION | BA | 70385 | |
| O.I.P.E. CLASSIFIER | | | 5 4-19-00 |
| FORMALITY REVIEW | EVH | 26743 | 10/20/00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
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Best Available Copy